



Request for Continued Examination under CFR 37 §1.114

Address to: Mail Stop RCE
Commissioner for Patents
P.O.Box 1450
Alexandria, VA 22313-1450

First Named Inventor: **Ulrich**
Group/Art Unit: **1645**
Filing Date: **July 14, 2003**
Express Mail Label No.: **EV905210558US**
Today's date: **April 1, 2008**

Examiner Name: **Mark Navarro**
Atty Docket No.: **003/267/SAP**

This is a request for a continued examination under 37 C.F.R. §1.114, (RCE) of prior application number **10/620,242**, filed on **July 14, 2003** entitled: **Glanders/Melioidosis Vaccines**

1. ☒ Enter the unentered amendment previously filed on **September 13, 2007.**
2. ☒ A Response to the Advisory Action dated September 24, 2007 is enclosed.
3. This application is filed by fewer than all the inventors named in the prior application, 37 C.F.R. §1.53(d)(4).
 - a. ☐ Delete the following inventor(s) named in the prior nonprovisional application:

 - b. ☐ The inventor(s) to be deleted are set forth on a separate sheet attached hereto.
4. ☐ A new power of attorney or authorization of agent (PTO/SB/81) is enclosed.
5. Information Disclosure Statement (IDS) is enclosed:
 - a. ☐ PTO-1449
 - b. ☐ Copies of IDS Citations
6. Small entity status
 - a. ☐ Small entity statement is enclosed, if (b) and (c) do not apply.
 - b. ☐ A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired.
 - c. ☐ Is no longer claimed.

RCE Continued

First Named Inventor: Ulrich
Group/Art Unit: 1645

Examiner Name: Mark Navarro
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7. ☒ Petition is hereby made to extend the original due date of _____ to cover the date of this paper accompanied by the extension fee of:

Large/Small entity:

<input type="checkbox"/>	1 mo.	\$120/\$55	
<input type="checkbox"/>	2 mos.	\$450/\$195	
<input type="checkbox"/>	3 mos.	\$930/\$465	
<input type="checkbox"/>	4 mos.	\$1,470/735)	\$0.00

<input checked="" type="checkbox"/>	RCE fee required under 37 CFR 1.17(e)	810.00
	Fee required	<u>\$810.00</u>

The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 21-0380.

- a. ☒ Fees required under 37 C.F.R. §1.16.
- b. ☒ Fees required under 37 C.F.R. §1.17.
- c. ☒ Fees required under 37 C.F.R. §1.18.

8. ☐ A check in the amount of \$_____ is enclosed.

9. ☐ Other:

NOTE: the prior applications correspondence address will carry over to the RCE unless a new correspondence address is provided below.

10. New Correspondence address:

US Army MPMC
504 Scott Street
Fort Detrick, Maryland 21702-5012
ATTN: MCMR SGRD-JA (Elizabeth Arwine - Patent Atty)

Telephone: 301-619-7808

Fax: 301-619-5034

11. Signature of Applicant, Attorney, or Agent required

Signature:

Elizabeth Arwine
Reg. No. 45,867

Date: April 1, 2008